

STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from
John Doe dba Doe's Limo

Application for a Class C Charter Certificate from
Yellow Cab Company of Charleston ~~Db a Charleston~~
~~Black Cab~~

BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

DOCKET
NUMBER: 2012 - 316 - T

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: Jerry G. Crosby, Vice-PresidentTelephone: 843-722-2222Address: 2019-A Cherry Hill LaneFax: 843-853-7172Charleston, SC 29405-9309

Other: _____

Email: jerryandjacquie@yahoo.co.uk

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

☐ Application - Class A/A Restricted☐ Application - Class C Taxi☒ Application - Class C Charter☐ Application - Class C Charter Bus☐ Application - Class C Non-Emergency☐ Application - Class C Stretcher Van☐ Application - Class E Household Goods☐ Application - Class E Hazardous Waste☐ Application☐ Request for Extension to Comply with Order☐ Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded☐ Request for Cancellation of Certificate☐ Request for Suspension☐ Request for Reinstatement☐ Request for Name Change on Certificate☐ Request to Amend Scope of Authority☐ Request to Amend Tariff (rate increase, etc.)☐ Request to Amend Passenger Limit☐ Request☐ Exhibit☐ Late-Filed Exhibit☐ Letter☐ Proposed Order☐ Publisher's Affidavit☐ Reservation Letter☐ Response☐ Return to Petition☐ Other: _____

RECEIVED

AUG 16 2012

SC SC
MAIL / DMS

RECEIVED

AUG 16 2012

SC SC
CLERK'S OFFICE

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

jbs

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
101 Executive Center Drive, Suite 100
Columbia, South Carolina 29210
(Mailing address: Post Office Drawer 11649, Columbia, SC 29211)

Phone: (803) 896-5100 Fax: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR
OPERATION OF MOTOR VEHICLE CARRIER

Date: August 16, 2012

CLASS C - CHARTER

Application is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.

1. Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name.)

Yellow Cab Company of Charleston

2019-A Cherry Hill Lane, Charleston, SC 29405-9309
Street Address of Applicant

Mailing Address of Applicant (if different from street address)

843-722-2222

Phone

843-853-7172

Fax

jerryandjacquie@yahoo.co.uk
Email Address

2. If the Applicant is an LLC or a corporation, a copy of the Certificate of Existence from the South Carolina Secretary of State and the Articles of Incorporation must be attached. (If incorporated outside of SC, attach South Carolina Secretary of State "Foreign Corporation" Certificate.)

3. Select Entity Type: (Check one)

- ☐ Individual Owner/Sole Proprietorship
☐ Partnership - List names and addresses of all person having an interest in the business.
☒ Corporation - List names and addresses of two principal officers.

Ernest B. Crosby, President 2019-A Cherry Hill Lane, Charleston, SC 29405-9309

Jerry G. Crosby, Vice-President 2019-A Cherry Hill Lane, Charleston, SC 29405-9309

Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

BALANCE SHEET

Balance at Time Application is Filed:

Month June 30 Year 2012

Assets:

Cash	1,254,972.21
Receivables	110,854.51
Real Estate (Leasehold Improvements Only)	58,949.17
Buildings and Equipment (Net) (fully depreciated)	0.00
Motor Vehicles (Net) (fully depreciated)	0.00
Garage Equipment (Net) (fully depreciated)	0.00
Machinery and Tools (Net) (fully depreciated)	0.00
Supplies on Hand	20,239.74
Prepays and Other Assets	82,951.79
Total Assets*	1,527,967.42
<u>Liabilities and Equity:</u>	
Accounts Payable	5,891.67
Notes Payable	0.00
Mortgages Payable	0.00
Equipment Obligations	0.00
Accrued Salaries and Wages	8,004.59
Other Accrued Obligations	77,113.73
Other Liabilities	254,598.95
Total Liabilities	345,608.94
Capital Stock	201,943.12
Retained Earnings	980,415.36
Total Equity	1,182,358.48
Total Liabilities and Equity*	1,527,967.42

* Total Assets = Total Liabilities and Equity

PROPOSED RATES AND CHARGES FOR SERVICE

Proposed Rates and Charges (List only maximum charges per mile or trip, and/or hourly rate):

Our initial proposed rate is \$85 per hour.

Requested Scope of Authority: Check all counties in which you are requesting permission to operate.
You will only be allowed to operate in those counties checked below. You may request "Statewide" authority if you intend to operate in all counties in South Carolina.

- | | | | | |
|-------------------------------------|---------------------------------------|-------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Abbeville | <input type="checkbox"/> Cherokee | <input type="checkbox"/> Florence | <input type="checkbox"/> Lee | <input type="checkbox"/> Saluda |
| <input type="checkbox"/> Aiken | <input type="checkbox"/> Chester | <input type="checkbox"/> Georgetown | <input type="checkbox"/> Lexington | <input type="checkbox"/> Spartanburg |
| <input type="checkbox"/> Allendale | <input type="checkbox"/> Chesterfield | <input type="checkbox"/> Greenville | <input type="checkbox"/> Marion | <input type="checkbox"/> Sumter |
| <input type="checkbox"/> Anderson | <input type="checkbox"/> Clarendon | <input type="checkbox"/> Greenwood | <input type="checkbox"/> Marlboro | <input type="checkbox"/> Union |
| <input type="checkbox"/> Bamberg | <input type="checkbox"/> Colleton | <input type="checkbox"/> Hampton | <input type="checkbox"/> McCormick | <input type="checkbox"/> Williamsburg |
| <input type="checkbox"/> Barnwell | <input type="checkbox"/> Darlington | <input type="checkbox"/> Horry | <input type="checkbox"/> Newberry | <input type="checkbox"/> York |
| <input type="checkbox"/> Beaufort | <input type="checkbox"/> Dillon | <input type="checkbox"/> Jasper | <input type="checkbox"/> Oconee | |
| <input type="checkbox"/> Berkeley | <input type="checkbox"/> Dorchester | <input type="checkbox"/> Kershaw | <input type="checkbox"/> Orangeburg | <input checked="" type="checkbox"/> Statewide |
| <input type="checkbox"/> Calhoun | <input type="checkbox"/> Edgefield | <input type="checkbox"/> Lancaster | <input type="checkbox"/> Pickens | |
| <input type="checkbox"/> Charleston | <input type="checkbox"/> Fairfield | <input type="checkbox"/> Laurens | <input type="checkbox"/> Richland | |

DESCRIPTION OF EQUIPMENT

You are **not** required to own a vehicle to file an application. However, prior to being issued a certificate by ORS, you will be required to have obtained a vehicle.

Maximum Number of Passengers Vehicle is Equipped to Carry: (The number of passengers a vehicle is equipped to carry is based on the number of seatbelts in the vehicle, including the driver's seatbelt.)

☒ 1-7 Passengers, including driver

☐ 8-15 Passengers, including driver

MAKE	YEAR & MODEL	VIN#	EMPTY WEIGHT

INSURANCE QUOTE

This form **MUST BE COMPLETED AND SIGNED** by an **AUTHORIZED INSURANCE COMPANY REPRESENTATIVE**. The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide a copy of insurance policies unless requested. You will not be required to purchase insurance until your application has been approved and an order has been issued by the PSC. THIS IS ONLY A QUOTE.

The following insurance quote is for:

Yellow Cab Company of Charleston

Name of Applicant

(Self-Insured (Cert. Enclosed))

2019-A Cherry Hill Lane, Charleston, SC 29405-9309

Address of Applicant

Amount of Premium:

Limits Quoted: (See Below)

Liability Insurance \$ _____

Limits _____

The above quoted premium is for a term of _____ months.

Minimum Limits - Intrastate Only:

1-7 Passengers* \$ 25,000/50,000/25,000

8-15 Passengers* \$ 25,000/100,000/25,000

* Passengers = Number of seatbelts in the vehicle, including the driver's seatbelt

Name of Insurance Company

Home Office Address of Company

I am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

Date

Authorized Insurance Company Representative's Signature

NOTICE:

If you wish to self-insure your motor vehicles for liability and property damage, you must comply with S.C. Code Ann. Sections 56-9-60 and 58-23-910. For more information, contact Vickie Coker with the Department of Motor Vehicles at (803) 896-8457.

If you wish to apply as a self-insured for worker's compensation coverage in South Carolina you may do so with the South Carolina Worker's Compensation Commission (WCC) provided that you will be able to: 1) post a surety bond or letter-of-credit with the WCC for a minimum of \$500,000, 2) agree to pay a yearly self-insurance tax, and 3) agree to pay an annual assessment to the South Carolina Second Injury Fund. For more information, contact the WCC Self-Insurance Division at (803) 737-5712 or on the web at www.wcc.state.sc.us/self-insurance.



**South Carolina Department of Motor Vehicles
Self Insured Certification**

YELLOW CAB COMPANY OF CHARLESTON

Has been approved as a Self-insurer for: Bodily Injury, Property Damage and Uninsured Motorist under the South Carolina Motor Vehicle Financial Responsibility Act.
Certification is granted under the conditions set forth on the attached Financial Requirements for Self-Insured Certificate and may be cancelled by the Department as provided in Section 56-9-60 of the 1976 South Carolina Code of Laws, as amended.

Effective Dates : October 1, 2011 to September 30, 2012

S.I. No. 18

M. Woodhurst
Melinda S. Woodhurst, Deputy Director of Administration

Date 9/10/2011

Form FD-327 (Rev. 9/99)

Exhibit Fit, Willing, and Able (FWA)

Yellow Cab Company of Charleston
Name of Applicant

1. Are there currently any outstanding judgments against the Applicant?

☐ Yes ☒ No

If Yes, indicate nature of judgement(s) against applicant.

2. Is Applicant familiar with all statutes and regulations, including safety regulations and governing for-hire motor carrier operations in South South Carolina, and does Applicant agree to operate in compliance with these statutes and regulations?

☒ Yes ☐ No

3. Is Applicant aware of the Commission's insurance requirements and the insurance premium costs associated therewith?

☒ Yes ☐ No

Exhibit on Driver Qualifications

1. Applicant understands that all drivers must be a minimum of 18 years of age.

☒ Yes

☐ No

2. Applicant understands that a certified copy of the driver's three (3) year driving record issued by the SC DMV and such record from the DMV of the state in which the driver is or has been domiciled for such period must be maintained in the Applicant's business office.

☒ Yes

☐ No

3. Applicant understands that a criminal history background check from the state where the driver currently lives must be maintained in the Applicant's business office.

☒ Yes

☐ No

4. Applicant understands that all drivers operating a vehicle under a Class C Certificate must have in their possession when operating a charter vehicle, a valid driver's license issued by the SC DMV or the current state of residence of the driver.

☒ Yes

☐ No

5. Applicant understands that all Class C Certificate holders are prohibited from employing or leasing vehicles to drivers who are registered, or required to be registered, as sex offenders with the South Carolina State Law Enforcement Division or any national registry of sex offenders.

☒ Yes

☐ No

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
POST OFFICE DRAWER 11649
COLUMBIA, SOUTH CAROLINA 29211

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Volume 26, S.C. Code Ann. Regs., 1976), and R.38-400 through R.38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Volume 23A, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

The Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.



Applicant's Signature

Jerry G. Crosby, Vice-President

Title of Applicant (e.g. President, Owner, etc.)

STATE OF SOUTH CAROLINA)
COUNTY OF Charleston)

SWORN TO BEFORE ME
This 16th day of August, 2012


Notary Public

Commission Expires AUGUST 11, 2016

The State of South Carolina,

EXECUTIVE DEPARTMENT

WITNESSES,

William M. Morrison, Jr., and Maurice D. Crosby

of

Charleston, South Carolina

do on the **1st** day of **May**, **1963**, file with the Secretary of State a written Declaration, signed by themselves, setting forth:

FIRST: That their names and residences are as above given.

SECOND: That the name of the proposed corporation is **YELLOW CAB COMPANY OF CHARLESTON**

THIRD: That the principal place of business is **77 Wentworth Street, Charleston, S. C.**

FOURTH: That the general nature of the business which it is proposed to do is to own and operate a taxicab terminal station for the receiving of calls and dispatching of taxicabs; to own and operate taxicabs; to acquire, own and sell real and personal property, and, generally, to perform all corporate functions not specifically prohibited by law.

That the total amount of the stock of the
within the State of South Carolina is increased
to the sum of **Eighty** shares, divided into
dividend: **Twenty** Dollars,
shares of **One Hundred** Dollars each.
GIVEN under my hand and the seal of the
State of South Carolina, this **1st** day of **May**,
A. D. 19**63**.

FIFTH: That the amount of the capital stock is **Sixteen Thousand (\$16,000.00)** Dollars payable in cash or notes.

SIXTH: That the number of shares into which the capital stock is divided is **One Hundred Sixty (160)** of the par value of **One Hundred (\$100.00)** each-----Dollars.

SEVENTH: That, after due notice, a meeting of the subscribers was held on the **27th** day of **April**, **63**, at which a majority of all stock in value being present in person or by proxy, the following were elected directors: **William M. Morrison, Jr., George S. Crosby, Maurice W. Crosby, Clarence Edgar Duke, Edward K. Pritchard**

EIGHTH: That subsequently there was elected as President, **Maurice W. Crosby**
as Vice-President, **George S. Crosby**, as Secretary, **T. Keith Marshall, Jr.**
as Treasurer, **T. Keith Marshall, Jr.**

NINTH: That all requirements of Title 12, Article 1, Chapter 2, Code of Laws of South Carolina, 1962, and all amendments therein have been duly and fully complied with, 50 per cent. of the aggregate amount of the capital stock having been subscribed by bona fide subscribers, 20 per cent. of the capital stock subscribed having been paid to the Treasurer, and three days' public notice of the intention to file this Declaration with the Secretary of State having been given in **The News and Courier**

a newspaper published in the County of **Charleston**

NOW, THEREFORE, I, O. FRANK THORNTON, Secretary of State, by virtue of the authority in me vested by the Charter Code and Acts supplementary thereto, do hereby certify that the said Company has been fully organized according to the laws of South Carolina, under the name and for the purposes indicated in their written declaration, and that they are fully authorized to transact business under their charter; and I do hereby direct that a copy of this certificate be filed and recorded in the office of the Register of Motor Conveyances or Clerk of Court in each county where such Corporation shall have a business office.

GIVEN under my hand and the seal of the State, at Columbia,
this **1st** day of **May**

in the year of our Lord one thousand nine hundred and

63

and in the one hundred and

63th

year of the Independence of the

United States of America.

O. FRANK THORNTON,

Secretary of State.

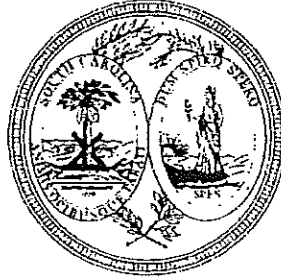
STATE OF SOUTH CAROLINA
RICHLAND COUNTY

THIS IS TO CERTIFY THAT This is a true and accurate copy of the charter of Yellow Cab Company of Charleston, recorded in the Records of the Secretary of State, Corporate Charter Division, Charter No. 36617, now on deposit with South Carolina Department of Archives and History.

GIVEN UNDER MY HAND AND THE SEAL OF THE DEPARTMENT This twenty-seventh day of August nineteen hundred and eighty-two.


(Ms.) Alexis J. Halsley, Supervisor
Reference and Research

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

YELLOW CAB COMPANY OF CHARLESTON,
a corporation duly organized under the laws of the State of South Carolina on May 1st, 1962, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great
Seal of the State of South Carolina this
14th day of August, 2012.


Mark Hammond, Secretary of State

Note: This certificate does not contain any representation concerning fees or taxes owed by the Corporation to the South Carolina Tax Commission or whether the Corporation has filed the annual reports with the Tax Commission. It is important to know whether the Corporation has paid all taxes due to the State of South Carolina, and has filed the annual reports, a certificate of compliance must be obtained from the Tax Commission.